PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

10721249

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Coiu	olumn 2)		TYPE C		OR 1		
TOTAL CDAIMS			15				ľ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			15 minus 20=		• 0			X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS			ال minus 3 =		1			X43=		OR	X86=	36
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=	0	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	856	
5/18/06 (Column 1) (Column 2) (Column 3)							<u> </u>	SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE.	ADDI- TIONAL FEE
	Total	.20	Minus	-2	Q	= 0		X\$ 9=		OR	X\$18=	
	Independent	· H	Minus	*** }	<u>}</u>	- <u>O</u>] [X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] [+145=		OR	+290=/	
: :								TOTAL		OR	TOTAL ADDIX FEE	A
			NDDIT. FEE		,	ADDY. PEEL						
Γ		(Column 1) CLAIMS		(Colun		(Column 3)	Т		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	###		=	1 [`X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	<u> </u>	」	÷145=		OR	+290=	
							_	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	·	= .		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	nere .		=]	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										UH		
• 1:	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290= TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE OR ADDIT. FEE												
		ber Previously Paid					er four	nd in the app	ropriate box	in cot	umn 1.	